A0620-2

Debts and Career Plans of Osteopathic Medical Students In 1989

Prepared by

Don C. Zobell
Director, Information Services

American Association of Colleges of Osteopathic Medicine

6110 Executive Boulevard, Suite 405
Rockville, Maryland 20852

June 1990

COLLEGES OF OSTEOPATHIC MEDICINE

Chicago College of Osteopathic Medicine
555 31st Street
Downers Grove, IL 60515
(708) 515-6472

College of Osteopathic Medicine of Oklahoma State University
1111 West 17th Street
Tulsa, Oklahoma 74107
(918) 582-1972

College of Osteopathic Medicine of the Pacific
College Plaza
Pomona, California 91766-1889
(714) 623-6116

Kirksville College of Osteopathic Medicine
800 West Jefferson Street
Kirksville, Missouri 63501
(816) 626-2121

Michigan State University College of Osteopathic Medicine
East Fee Hall
East Lansing, Michigan 48824
(517) 355-9611

New York College of Osteopathic Medicine of New York Institute of Technology
Wheatley Road, Box 170
Old Westbury, New York 11568
(516) 626-6900

Ohio University College of Osteopathic Medicine
Grosvenor and Irvine Halls
Athens, Ohio 45701
(614) 593-1800

Philadelphia College of Osteopathic Medicine
4150 City Avenue
Philadelphia, Pennsylvania 19131
(215) 871-1000

Southeastern University of the Health Sciences-College of Osteopathic Medicine
1750 N.E. 168th Street
North Miami Beach, Florida 33162
(305) 949-4000

Texas College of Osteopathic Medicine
3500 Camp Bowie
Fort Worth, Texas 76107
(817) 735-2000

The University of Health Sciences - College of Osteopathic Medicine
2105 Independence Boulevard
Kansas City, Missouri 64124
(816) 221-9698

The University of Medicine and Dentistry of New Jersey - School of Osteopathic Medicine
40 E. Laurel Road, Suite 100
Stratford, NJ 08084
(609) 346-6990

University of New England College of Osteopathic Medicine
11 Hills Beach Road
Biddeford, Maine 04005
(207) 283-0171

University of Osteopathic Medicine and Health Sciences/College of Osteopathic Medicine and Surgery
3200 Grand Avenue
Des Moines, Iowa 50312
(515) 271-1400

West Virginia School of Osteopathic Medicine
400 North Lee Street
Lewisburg, West Virginia 24901
(304) 645-6270

Table of Contents

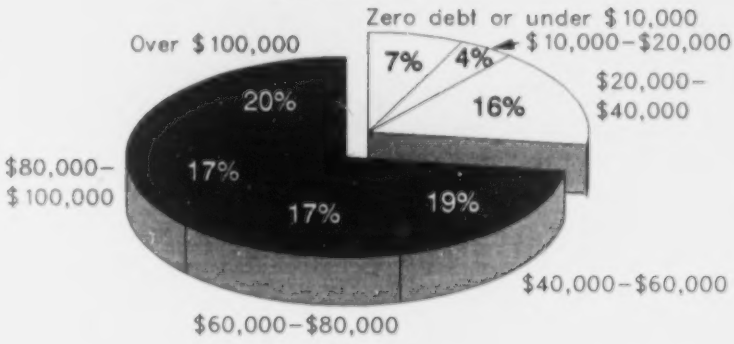
	Page
Executive Summary	1
Profiles	2
Debts and Marital Status	4
Debts by Sex and Age Groups	5
Medical School Indebtedness	6
Parents' Education	6
Parents' Income	7
Financial Independence	8
Scholarships and Grants	8
Loans	9
Loan Repayment	9
Financial Counseling	11
Plans upon Graduation	11
Career Choices	12
Residency and Income	14
Type of Practice Area	16
Region of Practice	18
The Survey	19
Publications	20

Chart 1

Distribution of Debts at Graduation

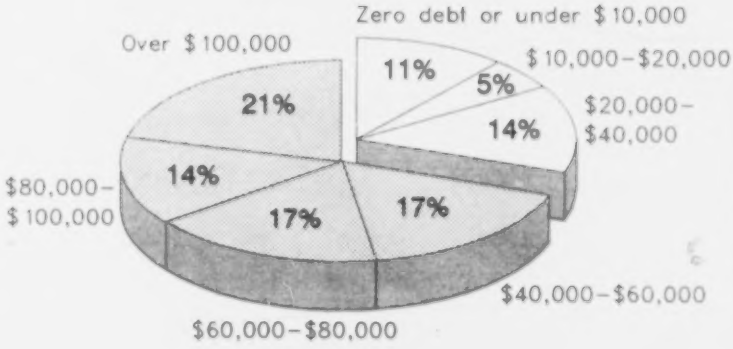
Seventy-three percent of the 1989 graduates owed $40,000 or more...

SENIORS



Average debt: $69,700

FRESHMEN



...sixty-nine percent of the freshmen expect to owe that much at graduation in 1992.

Average debt: $68,900

Executive Summary

When new doctors of osteopathic medicine leave their colleges, they enter a dark world of debt. For the 1989 graduates this prospect was heavier than ever before. The average senior owed $69,700; this debt was $5,000 greater than that of the 1988 graduate, and more than twice as great as that of the graduate of 1983. One out of five seniors owed more than $100,000, and some owed more than $150,000. With debts like these, it's tough to start in a demanding profession, and career decisions are colored by economic needs.

This information was reported in a survey of seniors and freshmen at the 15 colleges of the American Association of Colleges of Osteopathic Medicine. It is the eighth annual study of the Association and was carried out with the full cooperation of the member colleges. The students completed questionnaires providing many personal characteristics, including family background, economic situation, career plans, and expected income.

The new DOs, in their freshman year, had predicted that they would graduate owing $58,300; their estimated debt was only $3,000 higher than the debt of that year's seniors. Reality has surpassed their expectation by 20 percent. Freshmen in 1989 predict for themselves a graduation debt in 1992 of $68,900; their guess is optimistic as it is below the current level.

The burdens brought on by debts sometimes compel graduates to alter their basic career plans. After obtaining a DO degree, most graduates go into internship and then pursue advanced osteopathic education in residency. However, many would go directly into practice if it were not for their financial situation.

Approximately three out of five graduates said they would seek training in specialization. Thirteen percent said their financial needs had influenced their decision. Primary care remained the preferred specialty chosen by the graduates, who would pursue it through advanced study.

Almost half of the graduates come from cities of between 10,000 and 500,000 population, and most plan to practice in areas similar in size to their hometowns. However, many said they would have chosen to practice in smaller and underserved areas if it were not for their economic difficulties.

Forty-six percent of the seniors are married; their average debt is $70,800, while the unmarried seniors owe an average of $68,700. Male seniors tend to owe about 2.5 percent more than females. Four out of five say they are financially independent, and 47 percent have other dependents beside themselves. Parents of the seniors have incomes averaging under $50,000; for more than a third of

them the average is under $30,000. Larger loans were made by seniors whose parents had lower incomes.

Five years after graduation, the seniors expect their income will average about $74,000. There is a broad range of expected income, with one-fourth anticipating over $100,000 and about one-fifth under $30,000. These income figures may appear low, but are affected by more than a third of the seniors who will still be in residency training five years after graduation. On the average, seniors expect to repay their loans within about 14 years.

Profiles

Most of the graduates come from low or middle-income families and have high debts; a minority come from higher-income families and have lower debts. If we draw up profiles of the two extremes, this is what we find:

> The typical senior with a high debt is a married man, 26 years of age. His parents may not have attended college; the family income is under $40,000. He considers himself financially independent, but he may have one or more dependents. His college debt is about $70,000, and he expects to repay it within about 14 years. After graduation he intends to pursue advanced education and seek training in primary care. His home is in an area with a population between 10,000 and 500,000. He intends to practice in a similar area.
>
> On the other hand, the typical senior with low indebtedness is an unmarried woman. Her father has a medical degree, and her mother graduated with a health degree other than medicine or nursing. The family income is over $100,000 a year. She is financially dependent on her family, and reports having additional dependents. Her debt is under $40,000, and she intends to repay it within five years. Upon graduation she will enter a residency and seek specialty training as a DO. Her home is in an area with a population between 10,000 and 500,000, and she intends to practice in a similar area.

The magnitude of the graduates' burden can be better appreciated by looking at the numbers. Examining only those loans made by the seniors to finance their osteopathic education, we find that:

9 out of 10 owed more than $12,500
4 out of 5 owed more than $25,000
2 out of 3 owed more than $40,000
1 out of 3 owed more than $77,000
1 out of 5 owed more than $94,000
1 out of 10 owed more than $108,000
1 out of 17 owed more than $125,000

In addition to these osteopathic medical school obligations, one out of ten seniors still carried a debt of more than $10,000 from his or her undergraduate education. And one out of ten owed over $10,000 for debts not related to his or her medical school. These additional debts were incurred during the years of osteopathic education. A few of the students reported that these out-of-school debts surpassed $100,000.

With debts like these, when can the new DOs expect to be free of indebtedness? Three-fourths say they can do it in less than 15 years. Others, weighted down by the prospect, offer wild guesses, such as 30, 40 or even 50 years.

Information from the U.S. Public Health Service shows that graduates of the osteopathic medical schools have done a superior job in repaying their school loans. At the end of March 1990 the DO default rate was lowest of all the health professsions schools, 3.8 percent. The average rate of the health professions schools was 7.1 percent, and rates for other health professions schools were as high as 14 percent.

Debts and Marital Status

Seniors

The average total debt of the 872 seniors reporting was $69,700; this represents $5,000 and a 7.7 percent increase over the previous year's class, and is the highest level to date. Since 1983, indebtedness has been rising by thousands of dollars each year. This year, 37 percent of the seniors had debts of $80,000 or more. Eight and a half percent owed over $120,000.

Almost half of the seniors, 46 percent, were married. Their average debt was $70,800, 3.0 percent higher than that of the single senior. Four percent of the married seniors and six percent of the unmarried were free of debt. At the other extreme, twenty-two percent of the married seniors and nineteen percent of those unmarried owed more than $100,000 at graduation.

Freshmen

When the 1989 graduates were freshmen, they anticipated leaving medical school with an average debt of $58,300. Their actual debt was 20 percent greater than their estimate. The 1989 freshmen expect to graduate in 1992 owing $68,900; however, as the 1989 seniors owe more than that, the freshmen may be overly optimistic. Since 1986, freshman have consistently underestimated their graduation indebtedness. However, more than one out of three freshmen expects to owe more than $80,000; and one out of five anticipates a debt of over $100,000.

Twenty-eight percent of the freshmen are married, and they expect a higher debt than those unmarried, $73,700 compared to $67,000. Six married and 28 unmarried freshmen anticipate graduating medical school in 1992 without debt.

Distribution of Expected Debt at Graduation by Marital Status						
Expected Debt	Seniors Married	Seniors Unmarried	Seniors Total	Freshmen Married	Freshmen Unmarried	Freshmen Total
Zero to $20,000	9%	13%	11%	10%	19%	17%
$20,000-$40,000	17%	15%	16%	13%	14%	14%
$40,000-$70,000	26%	29%	28%	29%	24%	25%
Over $70,000	48%	43%	45%	48%	43%	44%
Average Debt	$70,800	$68,700	$69,700	$73,700	$67,000	$68,900

Debts by Sex and Age Groups

Debt loads differed only slightly between men and women. Among seniors, those with lower debts, i.e., under $40,000, included 27 percent of the men and 27 percent of the women. But men were slightly more likely than women to owe more than $80,000; this high-debt group included 38 percent of the men and 35 percent of the women. The average debt of male seniors was $70,200, and, of females, $68,500. It was also true among the freshmen that men expected to owe a little more than women.

Older students had higher debts at graduation than younger students. Seniors under 25 had debts averaging $62,900; 31 percent of them owed over $80,000. Seniors in each of the five-year age groups graduated with greater debts than younger seniors. Those over 35 owed an average of $82,700; almost half of them owed more than $80,000.

Medical School Indebtedness

Approximately ninety percent of the debt burden carried by the new DOs as they graduate has been or will be contracted during their years in osteopathic medical school; the balance has been carried over from undergraduate college. This was true for both seniors and freshmen. However, for the married seniors, the undergraduate debt represented a smaller portion of the total (7%) than it did for those unmarried (10%). The average size of the unpaid undergraduate debt was $5,026 for married seniors and $7,209 for unmarried seniors. The medical school debt was $65,800 for married seniors and $61,500 for single seniors. These figures indicate that married seniors in medical school had a greater need for loans than did those unmarried.

Parents' Education

Half the seniors reported that their fathers had not completed college. These young DOs graduated with an average debt of $73,700, six percent above the overall average of $69,700. For married seniors in this group, their average debt was even higher, $74,600; for single seniors, it was $72,900.

The lowest debts belonged to those seniors whose fathers had medical degrees. They averaged $57,000, a startling 18 percent below the overall average debt. Forty-one percent owed less than $40,000.

More than one out of ten of the students had fathers who had practiced medicine. Two out of five fathers had received other types of professional degrees.

The mothers of two out of three seniors had less than a college education; eight percent were in nursing, and 28 percent had other professional degrees. Senior debts were lowest for those whose mothers had degrees in health professions other than medicine.

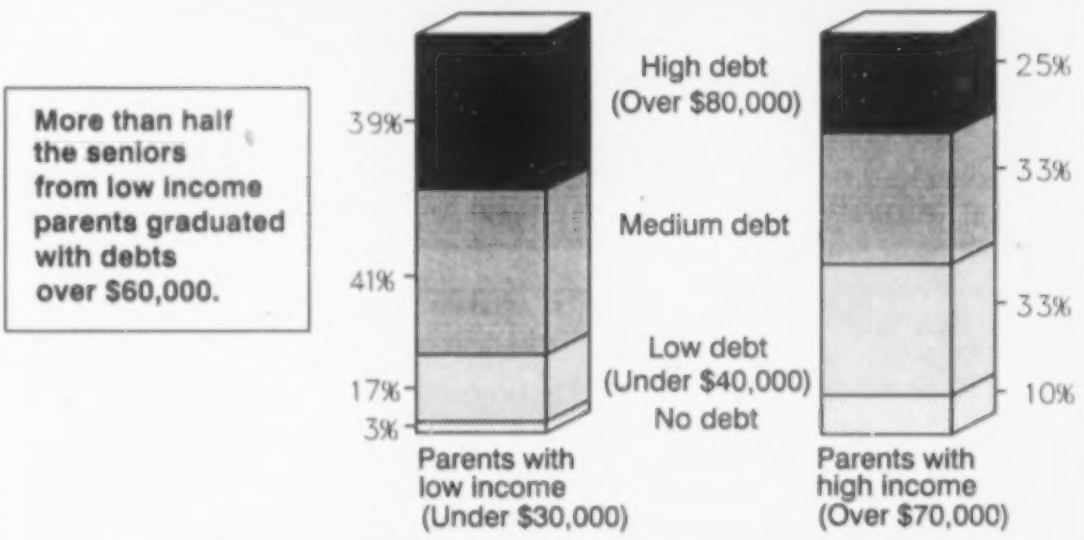
Parents' Income

Students took large loans during their years at osteopathic medical schools due to their families' financial limitations. Reports from seniors showed that those whose parents' income was very high (over $100,000) graduated with an average debt of $57,800; however seniors whose parents had low incomes (under $30,000) had loans averaging $73,500. Eighty percent of students from poorer families owed over $40,000, as did 58 percent of those from wealthier families. Four percent of the poorer graduates owed $140,000 or more; none of the wealthier graduates had such debts. (See Chart 2)

A similar distribution of expected debt and family income was predicted by the freshmen. Of those with family income under $30,000, 38 percent believed they would graduate owing more than $80,000.

Chart 2

Parents' Income and Senior Debt



Average debt	$73,500	$56,700

Financial Independence

Similarly, students who were financially independent undertook greater loans than those who were dependent on their families. The average loan of the independent students was $71,900; for those relying on family support it was $57,700.

Almost half of those students responsible for their own financial situation owed $70,000 or more. This compares with the debts of 29 percent of those students dependent on their families.

The amount of indebtedness was higher for new DOs with wives and children to support. Those seniors with no dependents but themselves graduated with an average debt of $67,700. Those with three additional dependents owed $79,100, and those with more dependents owed $91,200.

Scholarships and Grants

Seniors in 1989 had 14 percent fewer scholarships and grants during their stay at the osteopathic medical schools. These seniors reported 345 scholarships, as compared with 402 for the previous year's class.

Thirty-nine percent of the scholarships were awarded by the osteopathic school or its parent university; they averaged $5,400. Nineteen percent were contributed by state governments, and averaged $14,400. Other scholarships came from the Armed Forces and the Public Health Service. Sometimes partial repayment was required, or military service was expected. The largest amounts granted were those from the Armed Forces; they averaged $54,000. Students who had received Armed Forces scholarships graduated with the low average debt of $43,500.

Loans

Seniors made about 2,700 loans during their medical school education, averaging $65,000. In addition, many still owed debts from their undergraduate education averaging about $4,000; some expected to repay loans from their families, averaging $2,300.

The most popular loan was the Stafford Student Loan, insured by the state or federal government under the guaranteed loan program. More than 8 out of 10 graduates had this type of loan. There were 721 Stafford loans, comprising more than a fourth of all loans, and the student borrowers graduated with a debt from all sources of $72,000. The average Stafford loan was $26,000. There were 508 Health Education Assistance Loans (HEAL) for students who owed an average of $82,000 at graduation. These loans averaged $37,000. Perkins Loans (National Direct Student Loans) for 472 seniors averaged $7,200; on the average these seniors owed $75,500. Borrowers with the highest average indebtedness, $89,000, had loans insured by the state governments. State loans averaging $15,400 went to 149 seniors, and Health Professions Student Loans helped 308 seniors, with an average loan of $16,400.

Many seniors had loans from more than one source. Only 18 students reported no debts, or debts under $10,000.

For distribution of borrowers see Chart 3, on page 10.

Loan Repayment

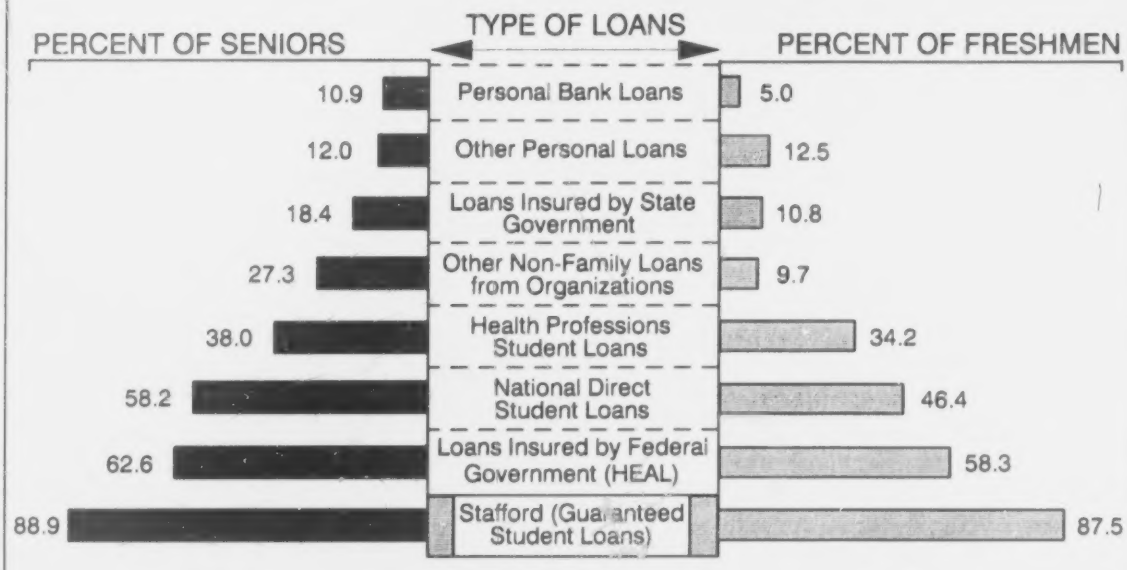
High debts will take longer for the DOs to repay. The average new DO expects to pay back his or her graduation indebtedness within 14.3 years. Those owing less than $40,000 (classified as low debts) plan to repay them within 9.7 years; for medium debts the estimated time is 14.6 years, and for debts over $80,000, 17.4 years.

About two-thirds of the seniors and three-fourths of the freshmen expect to pay off their medical college loans within fifteen years. However, 23 percent of the seniors say they will need more than 20 years to repay their debts; the majority of their loans (64%) exceeded $80,000.

Slightly more than half the seniors plan to participate in a student loan consolidation program for repayment of debts.

Chart 3

Distribution of Borrowers



Nearly nine of every ten borrowers had loans made under the Stafford (Guaranteed Student Loan) program.

Financial Counseling

Just over half the seniors understood how to finance a medical school education when they applied for admission to osteopathic medical school. Most of the others had received some counseling and information but felt it was not enough. In general, seniors had similar reactions to financial information they received during their enrollment.

The financial topics covered in school discussions included refinancing loans, loan interest and income tax, penalties for late payment, and loan consolidation. Many students received instruction on default of loan payment, indebtedness after graduation, loan deferment, and repayment terms. Few had discussed the amount of loans or sources of financial aid.

While the majority of seniors knew of their eligibility for loan consolidation and the consequences of deferring payment of interest, fewer knew the lender, the length of their loan repayment period, the starting time for repayment, or interest rates and terms.

Plans upon Graduation

After graduation from osteopathic medical schools and a rotating internship, about 19 out of 20 seniors plan to pursue advanced study in a specialized residency, such as general practice, anesthesiology, or dermatology. The average debt of those choosing advanced education was $70,000, four percent more than that of those entering practice, whose debt at graduation was $67,400. For both of these groups, more than a third of the seniors graduated owing over $80,000.

Only 30 seniors out of 872 (3.4%) intended to go directly from internship into practice after graduation from their osteopathic medical school. Sixteen (1.8%) chose to work with one or more partners, 11 (1.3%) to work alone, and three (0.3%) to enter a group practice. More than nine out of ten seniors said they would pursue an advanced education in residency training after internship.

Of those 30 seniors choosing to enter practice directly, ten of them said money was the principal factor in their decision. Those who said money was a major factor had debts averaging $95,000; those who said it was not a factor had debts averaging $60,000.

Some DOs going into residency training said that their economic situation did not determine their selection. However one-fourth of those responding said they would have chosen to go into practice in primary care if it were not for their economic need. Of those who said money was a major factor in their choice, a majority had high debts, averaging $84,000. Those who said money was one of several factors owed an average of $79,000. Those for whom money was not a factor owed $65,000.

Career Choices

Over nine percent of the seniors go into residency because of their financial situation, though they would prefer to enter general practice directly after internship. Another five percent feel the same, but their financial situation is one of several reasons, not the major one, for entering advanced education. Five years after graduation, 51 percent of the graduates will be practicing DOs; another third of them will continue in residency. Others may be in government service, research, or administration. One out of ten is undecided.

Primary care is the specialty chosen by most of the graduates; in addition to general practice, general internal medicine and pediatrics, many choose emergency medicine or obstetrics/gynecology. Financial situation does not significantly affect the graduates as they choose a specialty. However, a small percent say they would have chosen general practice were it not for their finances. Others say money is one of several considerations affecting their choice. See Chart 4 on Specialization.

Forty-two percent of the seniors select primary care. Of that group, 24 percent owe less than $40,000, 37 percent between $40,000 and $80,000, and 38 percent above that level. Twelve percent say their financial situation influenced their decision. Their average debt is $70,300.

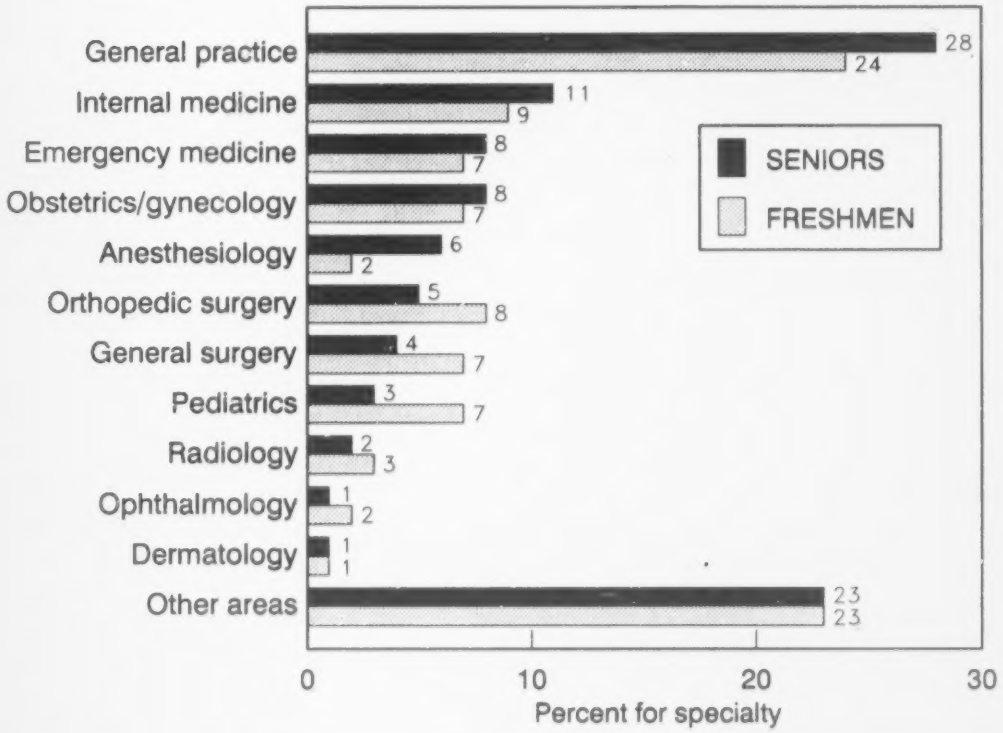
Fifty-eight percent of the seniors choose to seek training in other fields of specialization; 28 percent of them have zero or low debts, 35 percent medium level debts and 36 percent high debts. Thirteen percent say they considered their financial needs in making this decision. Their debts average $69,200.

After internship, those who have gone into residency training tend to have higher debts than those who have gone into practice; 39 percent of the DOs going into residency training have debts over $80,000, while 35 percent of those who will be in practice have similiar high debts.

Chart 4

Specialization

Just over 40% of the seniors and 40% of the freshmen intend to specialize in the fields of primary care.



Residency and Income

Almost all seniors plan on going into residency training directly after graduation and internship. The percentage choosing such training has increased over earlier years. Many will stay for a period of three years, about one-fourth will stay for four years, and some will remain even longer. The income seniors expect to earn during residency varies considerably. It averages $22,000, but the high standard deviation reflects a broad spread, with many seniors anticipating $40,000 or more.

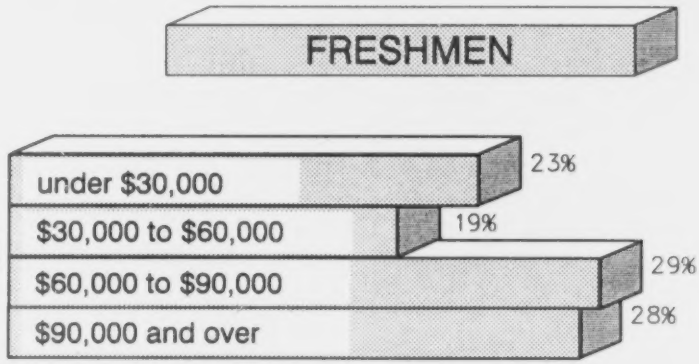
During their first year after a residency, the seniors expect to earn an average of $58,000 as practicing DOs. Once again the standard deviation is high; four percent of the seniors anticipate incomes of over $100,000. The prospective income for seniors ranges as high as $500,000.

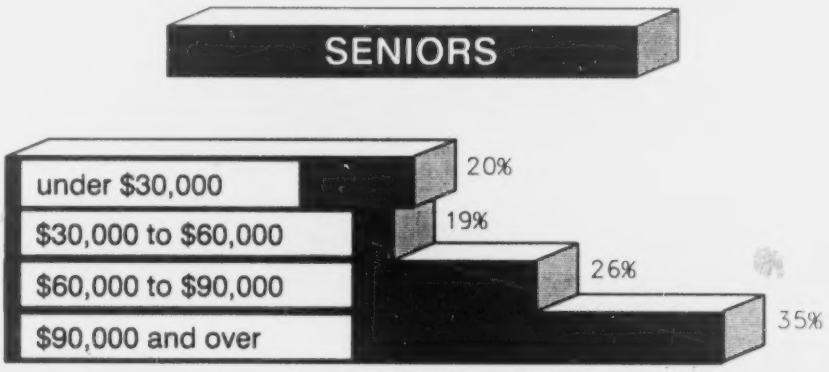
Five years after graduation, the average senior expects to be earning $74,000. This is the mean; the median is $70,000, indicating that the distribution is skewed to the right by several seniors expecting higher income. The distribution is such that nearly one out of four expects to have an income of $35,000 or less, while on the other extreme about one out of four will earn $100,000 or more. Many anticipate incomes of over $200,000. (See Chart 5)

About one-third of the new DOs will be in a specialty residency five years after graduation. However a fourth will be self-employed DOs with a partner, others will practice without a partner, and many will be in group practice.

Chart 5

Expected Earnings Five Years after Graduation





Many students graduate owing more than they expect to earn per year. Three out of four say their debt will be paid off in less than 15 years, but 23% of the seniors expect to take 20 years or more.

Type of Practice Area

Almost half of the seniors come from midsize cities, with populations ranging from 10,000 to 500,000. Twenty-one percent come from major metropolitan areas, 12 percent from smaller metropolitan areas, and 18 percent from areas under 10,000. The highest indebtedness is found in this last group, where almost half of the seniors owe over $80,000. The average debt of graduates from these small areas is ten percent higher than the average for all areas. (See Chart 6.)

Many of the new DOs intend to practice in an area similar in size to their hometowns. Of those seniors going to a major metropolitan area of 1,000,000 or more, slightly more than half come from a similar type of area. About a third are from a small city or town, and less than one tenth are from an area under 10,000. The average debt of those from areas with such small populations is over $80,000, while those from major metropolitan areas owe about $67,000.

Of the seniors from smaller metropolitan areas (500,000 to 1,000,000), 56 percent expect to practice in similar-sized places; 23 percent expect to work in smaller cities or towns. Those who come from major metropolitan areas but are going to smaller metropolitan areas have relatively high debts, an average of $80,000.

Seniors from cities of 10,000 to 500,000 seem generally content to practice in similar locations. Three out of five expect to work in such areas; this group has a relatively low average debt, $66,000.

About 16 percent of the seniors from rural areas (under 10,000) plan to work in places of the same size. Three out of five prefer to move to midsize cities, where they expect higher income. Their average debt is $77,000. Fourteen percent of the graduates say their financial situation has a strong influence on the type of area in which they expect to practice. Of these, 74 percent would prefer to work in a different type of area than the one where they expect to practice.

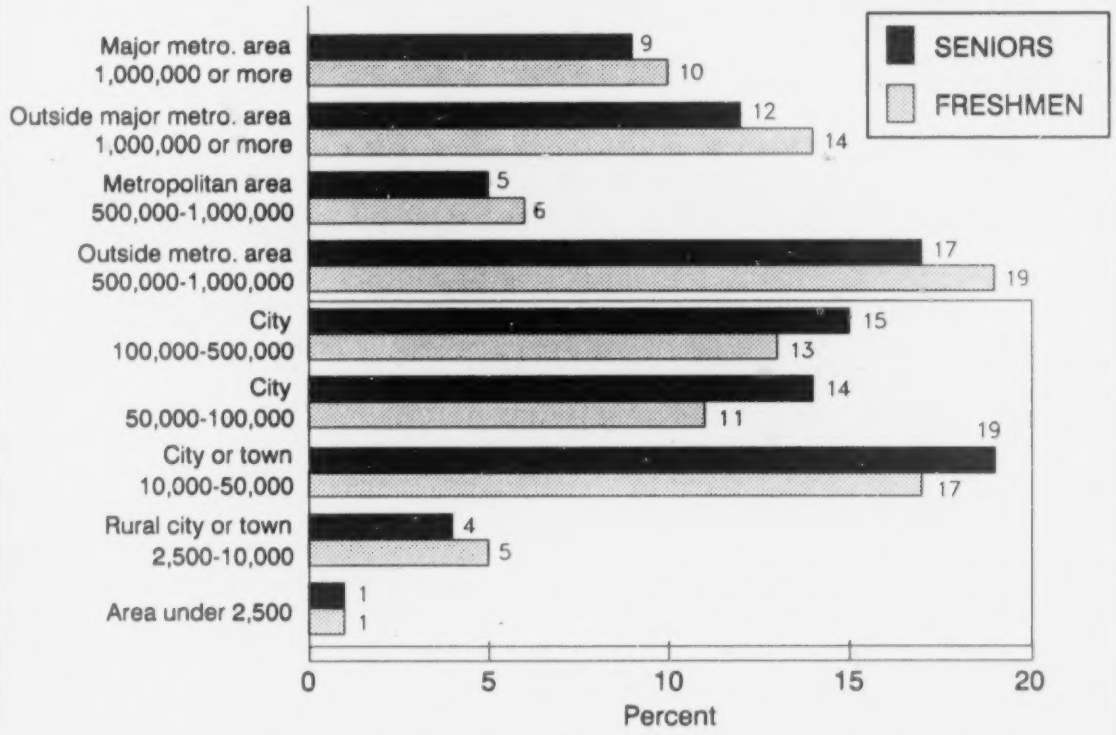
Within this group, 29 percent would have preferred to practice in a different rural area. These seniors had debts averaging $89,000. Another group, comprising more than half of those affected by their financial situation, would have preferred to practice in a location with a population between 10,000 and 500,000. Their debts averaged $84,000; over half of them owed $80,000 or more for their medical education.

It appears that many new DOs would choose to practice in smaller and underserved areas, but their economic difficulties and high indebtedness compel them to pursue better paying specialties and settle in more urban locations.

Chart 6

Type of Practice Area

A majority of seniors but only 47% of the freshmen intend to work in areas of under 500,000 population.



Region of Practice

More than half of the new DOs plan to practice in the Mideast or North Central region of the country five years after graduation. Of those responding, 37 percent selected the Mideast area, and 17 percent chose the North Central. The states attracting the largest percentages of graduates were New York, Pennsylvania, and Texas.

The mean debt of the DOs choosing the Mideast is $65,500; those going to the North Central states owe an average of $74,800. Graduates going to New England have the highest debts. Seven percent will be settling there, and they owe an average of $84,300.

More than half the graduates intend to locate immediately after graduation in an area within 200 miles of their parents' principal residence and of their osteopathic medical school. For many seniors, another important qualification is proximity to an advanced education program which they plan to attend. In addition, 40 percent said they expect to be near their pre-osteopathic college, and 29 percent will be near the home of their spouse's parents.

No more than ten percent of the seniors consider their financial situation a major factor in selecting their location. Fourteen percent of those planning to be near an advanced education program said that their financial situation had a slight influence in their choice of location. Others said that economics was not a factor at all.

However, it is interesting to note that seniors with the highest average debt (up to $79,000) are those planning to live in the proximity of their advanced study program. Many of the new DOs with high indebtedness feel that their situation requires advanced study in a specialized area.

The Survey

This report is the eighth annual study made by AACOM dealing with the debts and career plans of students at the 15 colleges of osteopathic medicine. It was prepared with the cooperation of school administrators and faculty, and expresses the hopes, plans and fears of the new DOs.

The survey was based on stratified random samplings of freshmen and a majority of seniors in each of the schools of osteopathic medicine during the school year 1988-1989. From a class of 1,780 freshmen, 402 reports were reviewed and tabulated, representing 23 percent of the total number of freshmen. This is the largest coverage of freshmen to date. A larger sample of the 1,617 seniors was requested and received. Questionnaires were tabulated for 872 seniors, 54 percent of the total number in the schools.

After review and editing, the data on the questionnaires were computerized and used to produce 26 analytical tables. The study included a series of correlation coefficients supporting, but not amplifying, the findings which are described in the report. High total debt was strongly related to individual types of debts, especially to HEAL loans, which were held by 63 percent of the seniors and averaged $37,000. High debt was related also to number of years to repay, and to high undergraduate debt, the amount originally borrowed, and the amount still owed at graduation from medical school. These correlation coefficients were all rated as significant. Though they were not surprising, they serve to support the findings of our survey.

The data reported by the students are consistent internally and with those reported in earlier years. The students' responses reflect a continuing upward trend in the amount of debts incurred and the need for higher income to pay off indebtedness. This need affects the students' choice of specialty as well as area of practice. Knowledge of this situation is essential to understand the problems of available osteopathic health care in the years ahead.

The American Association of Colleges of Osteopathic Medicine expresses its appreciation to the osteopathic medical schools, their staff, and their students, for the assistance they have provided in making these surveys possible.

PUBLICATIONS AVAILABLE FROM AACOM

AACOM Organizational Guide - the organizational structure of the Association, names and addresses of members of its councils/sections/committees, administrative staff and faculty in the 15 U.S colleges of osteopathic medicine. $9.00

Annual Statistical Report - a compilation of annual trends about the colleges of osteopathic medicine. Presented in tables and charts with accompanying text, the statistical data relate to the characteristics of applicants and matriculants in the osteopathic colleges, faculty, curriculum, sources of grants and loans, and distribution of revenues and expenditures. $12.00

Application Packet - an application for the centralized application service, procedures for applying, and materials describing each of the colleges and their fees. No charge

College Information Booklet - a brief description of each of the 15 osteopathic medical colleges, admissions criteria, minimum entrance requirements, supplementary application materials required, an indication of class size or enrollment, application deadlines, and tuition.

Single copies: $1.00; 25 copies: $12.50 100 copies: $37.00

Debts and Career Plans of Osteopathic Medical Students - a detailed survey that examines indebtedness of osteopathic medical students at the 15 osteopathic medical colleges. The characteristics and career plans of students are compared at their entrance to osteopathic medical school and just prior to their graduation. $9.00

The Education of the Osteopathic Physician - a comprehensive book that provides information about the profession that is essential to the health professions' advisor and the prospective student of osteopathic medicine. Provides admissions criteria and brief overviews of the 15 osteopathic medical schools, information on the educational process (medical school through internship and residency), licensure, practice options, and history and philosophy. $8.00

Osteopathic Medical Education - single copies of this brochure on training are free.

50 copies: $8.50 100 copies: $15.00

Osteopathic Medical Education: A Handbook for Minority Applicants - provides summary accounts of the osteopathic profession, pathways to osteopathic education, and the educational and training programs of the osteopathic colleges.

Single copies: $2.00 25 copies: $40.00 100 copies: $125.00

Study on Competency Based Objectives for Undergraduate Osteopathic Medical Education - minimum clinical competencies expected of a newly graduated osteopathic physician, component elements contributing to these competencies, and timetable for their introduction and/or completion. Competency objectives for medicine, surgery, pediatrics, obstetrics/gynecology, and general and family practice are identified. $18.00